

MARICOPA COUNTY BOARD OF HEALTH MEETING MINUTES

Monday, January 25, 2016

301 W. Jefferson Street, 10th Floor

Phoenix, Arizona 85003

Board of Supervisors Conference Room

Vice President Kip Steill called the meeting to order at 3:01 p.m.

ROLL CALL:

Members Present:

Don Cassano
Nedra Halley
Andrew Kunasek
Debra Baldauff
Kip Steill
Michael Mills, M.D.
Francisca Montoya

Members Excused:

Don Hughes
Dr. Scott Somers

Ex-Officio: Bob England, M.D.

CALL TO THE PUBLIC:

Mr. Kip Steill announced it was time for a call to the public and requested public comment forms for those who wanted to speak or who wanted to address any action items.

DISCUSSION/ACTION ITEMS

1. Election of Board of Health President

Vice President

Mr. Ingram has resigned from the Board of Health. A new president must be chosen to finish his term as president which will last till the end of this calendar year. Mr. Kip Steill (Vice President) was nominated as President of the Board Health. A motion was made by Mr. Don Cassano and seconded by Ms. Francisca Montoya and all were in favor. The motion passed unanimously. At the next Board of Health meeting a new Vice President will be elected.

2. **Approval of Minutes: President Steill asked for a motion to approve the minutes from the BOH Meeting held on October 26, 2015. Motion was made by Ms. Nedra Halley to approve the BOH minutes as presented. Motion was seconded by Mr. Don Cassano and all were in favor. The motion passed unanimously.**

3. Fee Waiver Applications

Ms. Jeannie Taylor

Ms. Jeannie Taylor presented twenty-three (16) fee waivers for review and consideration of approval. A summary sheet document was provided.

Motion to approve the 16 Fee Waiver applications was made by Ms. Nedra Halley, seconded by Dr. Michael Mills and all were in favor. Motion passed unanimously.

4. Air Quality Ozone Briefing

Mr. Philip A. McNeely

Mr. McNeely, Director of Air Quality, presented to the Board on ozone. He explained that Air Quality regulates toxic air pollutants and hazardous air pollutants (about 188 chemicals) and the six criteria pollutants (carbon monoxide, lead, nitrogen dioxide, ozone, particulates, and sulfur dioxide). There are 26 monitors throughout Maricopa County. The EPA has standards to regulate Air Quality. Ozone is a secondary contaminant that is created when exhaust (NOx) is mixed in the

atmosphere, along with heat and sunlight. Ozone is a tricky to handle. The precursors to ozone are VOCs(from trees, plants) and NOx (mainly from exhaust combustion). The ozone season is from June – August. Mr. McNeely explained the hourly ozone concentrations in urban, exurban, and remote areas. The ozone concentration in urban areas is low in the morning, peaks during the day, and drops off in the evening (this is due to people traveling to work and then the sun/heat going down). In the remote areas ozone can remain in the atmosphere up to 14 days due to no scavenger (NOx) that can steal an extra oxygen molecule from ozone. Ozone comes from Mexico, Canada, China, and California. Health impacts of ozone primarily affect the elderly and children and those with asthma. The high pollution advisory days are generally during the summer, and can be problematic for children in school. Continued effort to improve the alert of high pollution advisory days with schools is ongoing (and will follow a similar system as heat advisories). Ground level ozone is detrimental to vegetation and ecosystems. Every five years, the EPA updates the standards. The 2008 standard is 75 ppb and Maricopa County is averaging 79 ppb. The 2015 standard is 70 ppb. There are 6 monitors that are not meeting the 2008 standard. Mr. McNeely is going to propose nine draft rules for consideration of approval for the Board of Health in April. These rules will be in an effort to reduce ozone to meet the EPA standards for 2008. The rules being revised are as follows: 322, 323, 324, 336, 342, 350, 351, 352, and 353.

5. Health Impact Assessments

Mr. Kenneth Steel & Mr. David Dube

Dr. England has brought Mr. Steel and Mr. Dube to answer some questions about health impact assessments that Ms. Montoya had at the last Board of Health meeting. Mr. Steel showed a life expectancy map that was published two months ago by Virginia Commonwealth University, Center on Society and Health, and the Robert Wood Johnson Foundation. It illustrates different zip codes and their corresponding life expectancies. This was meant to start the discussion about what each societal context has on health. Health impact assessments (HIAs) provide recommendations on monitoring and managing effects of a proposed policy, plan, program, or project. Throughout the entire HIA process, stakeholder engagement is highly valued and solicited. The first HIA was completed in Arizona in 2010. There have been 15 since then. Three more HIAs will launch. Maricopa County has completed 7 HIAs. Mr. Dube gave an update on the South Central Neighborhood Transit Health Impact Assessment (SCNTHIA) which is the project to extend the light rail from Central Avenue to Baseline. MCDPH provided many examples of health impacts on that could be achieved by this plan. Valley Metro, Ross and Development Corporation, along with many others were on the insight committee for this HIA. It takes about 10 years for a light rail extension to be completed. The study area for SCNTHIA went from the 1-10 to Dobbins Road. The SCNTHIA recommendation had 41 recommendations, 15 of which directly impacted Valley Metro. The Madison Heights HIA was for a housing complex in Avondale that was being re-developed. This HIA came out with 15 recommendations and took place mostly in 2014. Two main recommendations that came out of this HIA was to create a safe space for children to get to school, (removing trash/redevelop the area) and also create a complete street on Dysart Road. The Shared Use Roosevelt HIA (SHUR) was just completed and published last month. This HIA looked at community use in the Roosevelt district area. Shared use could open playgrounds and parks after hours to have safe places for children to play. HIAs require a lot of both staff time and authentic community engagement. Through HIAs, MCDPH has been able to develop cross program approaches. It has allowed for communities to see data that is generated but not always accessible to them. Finally, HIAs have allowed for greater understanding of how policies can affect social determinants of health. A future HIA project is the City of Phoenix Canalscape. Mr. Dube and Mr. Steel encouraged the members of the Board of Health to think of the HIA process when making non-health sector decisions that could be better informed by the a process like the HIA. Ms. Francisca Montoya shared that South Phoenix light rail extension is on the agenda for city council on 1/26 and is being recommended as the first extension to be constructed. Dr. Michael Mills had a question about follow up on the HIAs. Mr. Dube explained that the 6th step,

monitoring, is used for continuing evaluation (including process, impact, and outcome evaluation).

Discussion Items:

Dr. Bob England

- 1. Public Health Report:**
 - i. Human Resources**
 - ii. Communication**
 - iii. Infrastructure**
 - iv. Strategic Planning**
 - v. Programs**
 - vi. Disease Update**
 - vii. Future Topics**

Dr. Bob updated the Board of Health on the ZBB report that MCDPH submitted to the chiefs of staff for the Board of Supervisors. The draft budget request is flat but Dr. Bob and Max Porter explained to several examples of return on investment opportunities that MCDPH is missing.

MCDPH will soon be undergoing a reorganization that will align staff by what external community they work with rather than grant-funded offices. The timeline for this re-org is still begin worked out.

As alluded to in the Finance Committee meeting, the Healthcare for the Homeless program will stay with MCDPH. A year and a half ago, MCDPH was informed that the program would no longer be able to function under MCDPH because MCDPH has a publically elected board. However, this was not true, thus the program will remain with MCDPH.

An emerging mosquito virus is zika virus. Zika virus is spread by *Aedes Aegypti* (a mosquito commonly found in Maricopa County). Zika virus may cause microcephaly in infants whose mothers were infected with the virus while pregnant. Zika virus has been found in Latin America, and so far, we have only had non-endemic cases in the states, with the exception of one case in Puerto Rico. CDC has issued travel advisories to South and Central America and parts of the Caribbean. Brazil is the epicenter for this outbreak and has even recommended that women try to not get pregnant. Zika virus has been added to the MCDPH website. Dr. Bob noted that the response to zika virus case in Maricopa County will be similar to if it was dengue or chikungunya case. The individual must stay inside their home and the surrounding area must be sprayed with pesticides.

ANNOUNCEMENTS AND CURRENT EVENTS

- Next meeting is April 25, 2016
- Supervisor Kunasek thanked Mr. Ingram for his service to the Board of Health. He also thanked the entire board for their citizen involvement.

ADJOURNMENT: There being no further business, motion to adjourn the meeting was made by Mr. Don Cassano, seconded by Ms. Francisca Montoya and motion was passed unanimously. The meeting was adjourned at 4:23 p.m.